

<b>REQUEST FOR LOGISTICS CATALOG DATA AND/OR INFORMATION</b> For use of this form, see AR 708-1; the proponent agency is ODCSLOG		1. DATE
2. TO: Executive Director USAMC Logistics Support Activity ATTN: AMXLS-ML Redstone Arsenal, AL 35898-7466	3. FROM:	
4. INFORMATION FURNISHED BY INITIATING ACTIVITY		
a. Item Name	b. National Stock Number	
c. Manufacturer's Code/Name and Address	d. Manufacturer's Part Number	
	e. End Item Noun Nomenclature	
	f. End Item National Stock Number	
5. SUBJECT		
Identify by checkmark the publication/document or subject requiring clarification or correction. Subjects or documents not listed should be provided in block marked "Other".		
<div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Army Master Data File (AMDF)</div> <div><input type="checkbox"/> AMDF Single Source Distribution</div> <div><input type="checkbox"/> AMDF Interrogation and Retrieval System</div> <div><input type="checkbox"/> AMDF Tailored Distribution System</div> <div><input type="checkbox"/> AMDF Retrieval Microform Systems (ARMS)</div> <div><input type="checkbox"/> AMDF Extracts</div> <div><input type="checkbox"/> Remote Terminal AMDF Inquiry System</div> <div><input type="checkbox"/> Army Adopted Items List, (SB 700-20)</div> <div><input type="checkbox"/> FED LOG</div> <div><input type="checkbox"/> ARMY LOG</div> </div>	<div style="display: flex; flex-direction: column; gap: 5px;"> <div><input type="checkbox"/> Management Control Number (MCN) System</div> <div><input type="checkbox"/> Sets, Kits, and Outfits Publications</div> <div><input type="checkbox"/> Technical Manual Publications</div> <div><input type="checkbox"/> Requisitioning</div> <div><input type="checkbox"/> Receipt of Material</div> <div><input type="checkbox"/> Interchangeability and Substitutability</div> <div><input type="checkbox"/> Unidentified Item</div> <div><input type="checkbox"/> Cross-Reference Verification</div> <div><input type="checkbox"/> Other</div> </div>	
6. REMARKS <i>(Describe specific problem or indicate the information you require. Use additional sheets as necessary to provide sufficient details)</i>		
7. NAME, GRADE OR TITLE AND TELEPHONE NUMBER	8. SIGNATURE	

9. TO:

10. FROM: Executive Director  
USAMC Logistics Support Activity  
ATTN: AMXLS-ML  
Redstone Arsenal, AL 35898-7466

11. REPLY

12. NAME, GRADE OR TITLE AND TELEPHONE NUMBER

13. SIGNATURE